

Self-Pay - Pricing -

MRI

Description	Price
MRI BRAIN WO CONTRAST	\$500.00
MRI BRAIN W/WO CONTRAST	\$600.00
MRI CERVICAL SPINE WO CONTRAST	\$500.00
MRI CERVICAL SPINE W/WO CONTRAST	\$600.00
MRI THORACIC SPINE WO CONTRAST	\$600.00
MRI THORACIC SPINE W/WO CONTRAST	\$700.00
MRI LUMBAR SPINE WO CONTRAST	\$500.00
MRI LUMBAR SPINE W/WO CONTRAST	\$600.00
MRI UPPER/LOWER EXTREMITY JOINT WO CONTRAST	\$600.00
MRI UPPER/LOWER EXTREMITY JOINT W/WO CONTRAST	\$700.00

Ultrasound

Description	Price
ULTRASOUND ABDOMEN WITH DOPPLER	\$400.00
ULTRASOUND SOFT TISSUE NECK/THYROID	\$200.00
CAROTID DOPPLER	\$400.00
ULTRASOUND KIDNEY	\$200.00
ULTRASOUND BLADDER	\$100.00
ULTRASOUND PELVIC	\$200.00
ULTRASOUND TRANSVAGINAL WITH DOPPLER	\$400.00
ULTRASOUND TESTICULAR WITH DOPPLER	\$400.00
VENOUS DOPPLER BILATERAL	\$400.00
VENOUS DOPPLER UNILATERAL	\$250.00
ECHOCARDIOGRAM	\$550.00

General X-Ray

Description	Price	
CHEST 2 VIEW	\$45.00	
KNEE 3 VIEW	\$60.00	
LUMBOSACRAL SPINE 2 OR 3 VIEW	\$75.00	
LUMBOSACRAL SPINE 4 VIEW	\$80.00	
SHOULDER COMPLETE	\$60.00	
HAND 3 VIEWS	\$60.00	
WRIST COMPLETE	\$60.00	
ABDOMEN SINGLE VIEW	\$50.00	
HIP UNILATERAL 2-3 VIEWS	\$75.00	
HIPS BILATERAL 3-4 VIEWS	\$75.00	
FOOT COMPLETE	\$60.00	
ANKLE COMPLETE	\$50.00	
CERVICAL SPINE 2 OR 3 VIEWS	\$60.00	
CERVICAL SPINE 4 OR 5 VIEWS	\$60.00	
THORACIC SPINE 3 VIEWS	\$60.00	
SACRUM AND COCCYX	\$50.00	
TIBIA/FIBULA 2 VIEWS	\$50.00	
FINGER(S) MINIMUM 2 VIEWS	\$60.00	
ELBOW COMPLETE	\$50.00	
RIBS UNILATERAL WITH SINGLE VIEW CHEST	\$65.00	
RIBS BILATERAL WITH SINGLE VIEW CHEST	\$90.00	
BONE AGE STUDY	\$50.00	
CLAVICLE COMPLETE	\$50.00	

CAT Scan

Description	Price
CT ABDOMEN WO IV CONTRAST	\$400.00
CT ABDOMEN W IV CONTRAST	\$500.00
CT ABDOMEN W/WO IV CONTRAST	\$500.00
CT ABDOMEN & PELVIS WO IV CONTRAST	\$400.00
CT ABDOMEN & PELVIS W IV CONTRAST	\$500.00
CT ABDOMEN & PELVIS W/WO IV CONTRAST	\$500.00
CT PELVIS WO IV CONTRAST	\$400.00
CT PELVIS W IV CONTRAST	\$500.00
CT PELVIS W/WO IV CONTRAST	\$500.00
CT CHEST WO CONTRAST	\$400.00
CT CHEST W CONTRAST	\$500.00
CT CHEST W/WO CONTRAST	\$500.00
CT LUNG SCREENING	\$250.00
CT CARDIAC SCORING	\$100.00
CT HEAD/BRAIN WO CONTRAST	\$400.00
CT HEAD/BRAIN W/WO CONTRAST	\$500.00
CT SINUS WO CONTRAST	\$400.00
CT IAC'S WO CONTRAST	\$400.00
CT IAC'S W CONTRAST	\$500.00
CT CERVICAL SPINE WO CONTRAST	\$400.00
CT CERVICAL SPINE W CONTRAST	\$500.00
CT THORACIC SPINE WO CONTRAST	\$400.00
CT THORACIC SPINE W CONTRAST	\$500.00
CT LUMBAR SPINE WO CONTRAST	\$500.00
CT LUMBAR SPINE W CONTRAST	\$600.00

Breast

Description	Price
DIGITAL SCREENING MAMMOGRAM WITH 3D	\$200.00
DIGITAL DIAGNOSTIC BILATERAL MAMMOGRAM WITH 3D	\$250.00
DIGITAL DIAGNOSTIC UNILATERAL MAMMOGRAM WITH 3D	\$200.00
SCREENING BILATERAL BREAST ULTRASOUND	\$200.00
UNILATERAL BREAST ULTRASOUND	\$150.00
MRI BREAST BILATERAL W/WO	\$700.00
MRI BREAST UNILATERAL W/WO	\$700.00

Nuclear Medicine

Description	Price
WHOLE BODY BONE SCAN	\$450.00
JOINT OR LIMITED BONE SCAN	\$300.00
3 PHASE BONE SCAN	\$600.00
SPECT BONE SCAN	\$400.00
CARDIAC STRESS TEST	\$900.00
GASTRIC EMPTYING STUDY	\$500.00
THYROID UPTAKE AND IMAGING	\$400.00
MUGA SCAN	\$450.00
HIDA SCAN	\$600.00

This is a list of our most common procedures. Naugatuck Valley Radiology offers time of service pricing on all services for our patients in place of billing insurance. Patients may choose this option if they have a high deductible or they are having a procedure they know their insurance will not cover. All our fees include the radiologist reading fee. Prices are subject to change.

Prospect

166 Waterbury Road Prospect, CT 06712

Waterbury

1389 West Main Street Waterbury, CT 06708

Diagnostic Imaging of Southbury

385 Main St South Union Square Bldg. #2 Southbury, CT 06488